

## OFFICIAL RESPONSES TO VENDOR QUESTIONS RFP-2019-OCOM-02-EHRAU June 19, 2018

No.	Question	Answer
1.	Approximately how many Eligible Hospitals have received State DHR incentive dollars?	Approximately 30
2.	Approximately how many Eligible Professionals have received State EHR incentive dollars?	Between 100 and 200
3.	What were the outcomes of the previous post payment audits performed?	Currently less than 15% of the audits have resulted in recoupments.
4.	What prepayment audit methodologies are currently in place?	Pre-payment verification procedures include, but are not limited to, a validation of the indicated Medicaid encounter volume reported to conclude Eligible Professionals (or groups) met the minimum 30% (or 20-29% for pediatricians) minimum Medicaid or Needy Individual utilization; review of submitted documentation for certified EHR technology; and verification of the hospital-based or practice predominantly criterion. For Meaningful Use objectives and Clinical Quality Measures, provider reports and supporting documentation and attestations are reviewed.
5.	How many hours does the annual post payment audit take?	This varies with the individual audits.
6.	Who can help us with the CLAS requirements and associated forms, should we need technical assistance?	Please refer to Section 6.1 Contact Information – Sole Point of Contact.



7.	Pg. 67-73, Appendix C - Addendum to Culturally and Linguistically Appropriate Services (CLAS) Section of RFP  a) Since the program auditor will not be dealing with the member population, and only communicating with providers, please indicate if this requirement is relevant. b) Is this document required to be submitted with the proposal, or at a later time?	<ul> <li>a) Referring to the Appendix C – Addendum to Culturally and Linguistically Appropriate Services (CLAS) Section of RFP for Purpose of Documenting Title VI Compliance, "All DHHS bidders are required to complete the following two (2) steps as part of their proposal:</li> <li>(1) Perform an individualized organizational assessment, using the four-factor analysis, to determine the extent of language assistance to provide for programs, services and/or activities; and,</li> <li>(2) Taking into account the outcome of the four-factor analysis, respond to the questions below." (see pgs 69-73 of the RFP)</li> <li>b) Refer to last paragraph on page 69 of the RFP.</li> <li>This is not required with your bid. However, the successful bidder will be required to submit it within 10 days of the date that the contract is approved by the Governor and Executive Council.</li> </ul>
8.	<ul> <li>Pg. 74-76, Appendix D-Budget</li> <li>a) Should we insert 90% of the total cost in the "Contractor Share/Match" column and 10% of the total cost into the "funded by DHHS" column?</li> <li>b) Will DHHS consider cost proposals for Appendix D where the proposing vendor utilizes fully loaded rates and does not separately break out employee benefits, supplies, travel, etc.? (Appendix G, Pgs. 84-86, seems to allow for a fully loaded rate where that is the only cost billed to DHHS.)</li> </ul>	<ul> <li>a) No contractor match required. Total Program Cost will be Funded by DHHS using 90% Federal and 10% General Funds.</li> <li>b) Appendix D needs cost elements broken out as per the standard budget template. Note that not all of the listed cost elements may have a budget amount assigned to them.</li> <li>Appendix G needs fully loaded rates.</li> </ul>



- a) Should we utilize the title of program auditor for all positions or should we utilize our internal position titles?
- b) Should we assume for this RFP that all costs will be funded by this program and no costs will be funded by other sources?
- c) For site, should we list the location of the proposed individual or utilize the DHHS location?

- a) Utilize your internal position titles.
- b) Yes.
  - c) List the company location of the employee identified on the Program Staff List (if the company has multiple locations).

9.